

Original

Imminent Serious physical  
Threatening Danger Injuries

UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORK

MR. TREMEL WILLIAMSON PRO-SE

15CV5635

(In the space above enter the full name(s) of the plaintiff(s).)

-against-

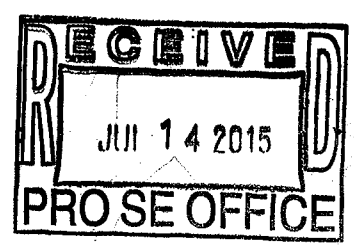
(Officially-Mount Vernon Police Dept  
County of Westchester  
(Individual) Police officers Griffin-  
2) officer Detective Antonini-officer  
Campo/and Sergeant Fagan of Mount  
Vernon Police Dept et al; Also City of  
MOUNT VERNON.

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

COMPLAINT

under the  
Civil Rights Act, 42 U.S.C. § 1983  
(Prisoner Complaint)

Jury Trial: ☐ Yes ☒ No  
(check one)



I. Parties in this complaint:

A. List your name, identification number, and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff Name MR. TREMEL WILLIAMSON PRO-SE  
ID # \_\_\_\_\_  
Current Institution Westchester County Jail  
Address P.O. Box-10/10 Wood Rd  
Valhalla, New York 10595

B. List all defendants' names, positions, places of employment, and the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1 Name Detective Antonini Shield # 111  
Where Currently Employed Mount Vernon Police Dept  
Address Two Roosevelt Sq 2nd Fl.  
Mount Vernon New York 10550

Defendant No. 2 Name Detective Griffin Shield # 116  
 Where Currently Employed Mount Vernon Police Dept  
 Address Two Roosevelt SQ 2nd fl.  
Mount Vernon New York 10550

Defendant No. 3 Name Police officer Campo Shield # 2003  
 Where Currently Employed Two Roosevelt SQ 2nd fl.  
 Address Mount Vernon Police Dept  
Mount Vernon, New York 10550

Defendant No. 4 Name SERGEANT FABIAN Shield # N/A  
 Where Currently Employed Mount Vernon Police Dept  
 Address Two Roosevelt SQ 2nd fl.  
Mount Vernon New York 10550

Defendant No. 5 Name \_\_\_\_\_ Shield # \_\_\_\_\_  
 Where Currently Employed \_\_\_\_\_  
 Address \_\_\_\_\_

## II. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

- A. In what location did the events giving rise to your claim(s) occur?  
Said Incident Occur in Various Location of Mount Vernon New York
- B. Where in the location did the events giving rise to your claim(s) occur?  
Location of events Was 70 West 3rd Street and inside of my family Apartment
- C. What date and approximate time did the events giving rise to your claim(s) occur?  
On January 20th 2015 between the time of 5:45 p.m. + 6:30 p.m.

D. Facts: Claimant Seek Relief to be Granted for Excessive Force Abusive acts of Defendant(s) Cause of Action Relief is Monetary Compensation, Punitive Damages Past, Present + Future Damage Adversant + Hazzardous Negligence Gross Malicious Negligence.

What happened to you?

Who did what?

All Other Fact of Damages Cause of Action and relief to be Granted is (Enclosed on page 3A + 3B + 3C Attached

Was anyone else involved?

SEE ATTACH PAGES

Who else saw what happened?

Only Family Members after being brought Inside Said APT/SK Building - 70 West Third ST.

SEE "ATTACH" AFFIDAVIT

### III. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received. Medical Treatment Was Deliberately Denied

Claimant has Suffered Emotional Physical Infliction Distress also being choke and chaggy by officers Scraps + Bruises Squeezing of my Testicle hard, punching Rib became Bruised Illegal Cavity Rectum Search Sodomizing Action(s) of Said all Defendant(s) Excessively Tortured and lost Conscious, Dizziness, Blurry eyesight

### IV. Exhaustion of Administrative Remedies:

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted." Administrative remedies are also known as grievance procedures.

A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

Yes \_\_\_\_ No ☒

AFFIDAVIT OF Tremel Williamson

NEW YORK STATE                    )  
                                      )SS  
WESTCHESTER COUNTY                )

Comes now, Tremel Williamson, your Affiant, being competent to testify and being over the age of 21 years of age, after first being duly sworn according to law to tell the truth to the facts related herein states that he has firsthand knowledge of the facts stated herein and believes these facts to be true to the best of his knowledge.

1. On January 20, 2015, as your affiant was walking up 3rd street, passing 7th avenue, he entered the walkway of the Fire Station on 3rd street.
2. Your Affiant observed a black Hyundai coming toward him, at full speed.
3. The vehicle stopped directly in front of your Affiant. Detective Antonini exited the vehicle and, without identifying himself, told your Affiant not to move.
4. At that point the alleged detective shackled your Affiant without a valid warrant, breach of the peace, probable cause or your Affiant's consent, in violation of clearly established law.
5. Your Affiant was then abducted and forced into the back seat of the vehicle.
6. Your Affiant was then asked by the alleged Detective, if he had house keys to 70 West 3rd Street.
7. Your Affiant responded, "No!", not knowing who I was talking to, and informed Detective Antonini that he did not live there.
8. After closing the door to the vehicle, the alleged Detectives drove to the back of 70 West 3rd Street.
9. At that point, Detective Antonini attempted to pull down your Affiant's pants, until he seized the keys, without a valid and lawful warrant, in violation of established law.
10. Your Affiant was then informed by Detective Griffin that he had a warrant, although it was never shown to your Affiant.
11. During the ordeal, Detective Griffin got in the back seat of the vehicle and in an intimidating and menacing manner, shined his flashlight in your Affiant's face.

-2-

12. At that point, alleged Officer Campo, badge 2003, in plain clothes, came to the vehicle and informed Detective Griffin that they got into the house, although it was without a valid or lawful warrant or consent from anyone.
13. Your Affiant was then forcibly taken into the building by the alleged officer and detective.
14. While in the lobby of the building, your Affiant observed another officer with a police dog.
15. Upon requesting that the dog be moved because of his fear of them, Officer Campo punched your Affiant in the face and banged his head against the elevator door.
16. Your Affiant felt dizzy and everything seemed blurry momentarily and I lost consciousness from the assault and battery of Officer Campo.
17. When your Affiant was brought into his mother's home, he observed that everyone was handcuffed.
18. At that point, your Affiant was brought to the bathroom and sexually abused by Detective Antonini and Sergeant Fagan.
19. After Detective Antonini unbuckled the belt of your Affiant, Sergeant Fagan choked him and squeezed his testicles. Then Detective Antonini performed a cavity search, sodomizing your Affiant by puncturing his anus with his finger.
20. Your Affiant screamed due to the excruciating pain being inflicted resulting from the abuse and begged them to stop.
21. Your Affiant's family, became extremely concerned from the screams and demanded to know what was going on. When your Affiant's sister demanded to know what was happening, she was threatened by Sergeant Fagan with disorderly conduct.
22. Your Affiant demanded to see the search warrant . However, a search warrant was never presented.
23. Your Affiant was then brought to an unknown place which he later learned was the Mount Vernon Police Department.
24. Your Affiant alleges that the detectives acted under the color of law and outside the law in violation of his unalienable , substantive, and civil rights.
25. Upon arriving at the Mount Vernon Police Department, your Affiant requested medical treatment because of the injuries he sustained from the sexual and excessive abuse.

-3-

26. The officers refused your Affiant's request for medical attention.

27. Your Affiant was not immediately taken before a judicial officer of competent jurisdiction, to determine whether the alleged arrest was lawful or if there was probable cause for the alleged arrest pursuant to clearly established law.

28. At all times, your Affiant did not engage in any conduct having any tendency to cause any act of violence by any reasonable person or person(s) nor did he intend to cause any public inconvenience, annoyance, alarm, or recklessly create a risk, thereof.

30. At all times mention, detectives Antonini and Griffin were not engaged in serving or carrying out any criminal process nor did they have lawful right to engage your Affiant.

31. All of the detectives, at all times related herein, acted wrongly, recklessly, willfully and maliciously and "in concert" with additional state officers showing a callous disregard of, and a deliberate indifference toward your Affiant and rights protected and guaranteed by the Constitution, with the direct intent and sole purpose of injuring, humiliating, vexing, oppressing and causing mental anguish to your Affiant.

32. Your Affiant at all times had a reasonable expectation that defendant(s) would abide by their oath of office and duties not to violate the protection secured in the FEDERAL CONSTITUTION and the NEW YORK STATE CONSTITUTION.

Futher your Affiant say naught.


  
Signature

4-20-15  
Date

The use of notary below is for identification only and such use does not grant any jurisdiction to anyone.

State of New York  
County of Westchester

Subscribed and sworn to (or affirmed) before me on this 20 day of April 2015 by Tremel Williamson, proved to me on the basis of satisfactory evidence to be the natural person who appeared before me.

  
Notary Public

THOMAS V RUGGI  
NOTARY PUBLIC-STATE OF NEW YORK  
No. 01RU6251407  
Qualified in Westchester County  
My Commission Expires November 14, 2018

3C

If YES, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).

N/A

B. Does the jail, prison or other correctional facility where your claim(s) arose have a grievance procedure?

Yes \_\_\_\_\_ No \_\_\_\_\_ Do Not Know X

C. Does the grievance procedure at the jail, prison or other correctional facility where your claim(s) arose cover some or all of your claim(s)?

Yes \_\_\_\_\_ No X Do Not Know \_\_\_\_\_

If YES, which claim(s)? \_\_\_\_\_

D. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose?

Yes \_\_\_\_\_ No X

If NO, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

Yes \_\_\_\_\_ No X

E. If you did file a grievance, about the events described in this complaint, where did you file the grievance?

N/A (Action(s) Was done by Municipality)

1. Which claim(s) in this complaint did you grieve? N/A

2. What was the result, if any? N/A

3. What steps, if any, did you take to appeal that decision? Describe all efforts to appeal to the highest level of the grievance process.

N/A

F. If you did not file a grievance:

1. If there are any reasons why you did not file a grievance, state them here: \_\_\_\_\_

N/A  
BUT Claimant Was Interviewed by Eternel  
Affairs Awaiting Report

2. If you did not file a grievance but informed any officials of your claim, state who you informed,



when and how, and their response, if any: Awaiting

- G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.

N/A

**Note:** You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.

**V. Relief:**

State what you want the Court to do for you (including the amount of monetary compensation, if any, that you are seeking and the basis for such amount).

STATEMENT of Claim to be Granted by  
Claimant is Monetary, Punitive, Mental Anguish Compensation  
Cause of Action of Defendant Was Recklessness Wanton  
Infliction Adverant + Hazzardous Negligence Deliberate Indifference  
Gross Malicious Excessive Badly Harm

Plaintiff Seeks Damages in Said Amount

- 1) Det Antonini Amount \$350,000.00
- 2) Det Griffin Amount \$750,000.00
- 3) Police Officer Campo Amount \$500,000.00
- 4) Sergeant Fagan Amount \$1,000,000.00

Also claimant Request Monetary Damage for now  
Nightmares, Mental Distress, FLASHBACK in Amount against the  
City of Mount Vernon N.Y. \$200,000.00  
and for other Relief the Court See Deem and proper

**VI. Previous lawsuits:**

- A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?

Yes \_\_\_ No X

On  
these  
claims



- B. If your answer to A is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another sheet of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff N/A

Defendants \_\_\_\_\_

2. Court (if federal court, name the district; if state court, name the county) \_\_\_\_\_

3. Docket or Index number \_\_\_\_\_

4. Name of Judge assigned to your case \_\_\_\_\_

5. Approximate date of filing lawsuit \_\_\_\_\_

6. Is the case still pending? Yes \_\_\_\_\_ No \_\_\_\_\_

If NO, give the approximate date of disposition \_\_\_\_\_

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) \_\_\_\_\_

\_\_\_\_\_

On  
other  
claims

- C. Have you filed other lawsuits in state or federal court otherwise relating to your imprisonment?  
Yes \_\_\_\_\_ No XX

- D. If your answer to C is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff N/A

Defendants \_\_\_\_\_

2. Court (if federal court, name the district; if state court, name the county) \_\_\_\_\_

3. Docket or Index number \_\_\_\_\_

4. Name of Judge assigned to your case \_\_\_\_\_

5. Approximate date of filing lawsuit \_\_\_\_\_

6. Is the case still pending? Yes \_\_\_\_\_ No \_\_\_\_\_

If NO, give the approximate date of disposition N/A

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) \_\_\_\_\_

\_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 7<sup>th</sup> day of July, 2015.

Signature of Plaintiff

Inmate Number

Institution Address

Pro-Se  
County I.D.-187575/  
Westchester County Jail  
P.O. Box-10/10 Wood Rd.  
Valhalla, New York 10595

**Note:** All plaintiffs named in the caption of the complaint must date and sign the complaint and provide their inmate numbers and addresses.

I declare under penalty of perjury that on this 7<sup>th</sup> day of July, 2015 I am delivering this complaint to prison authorities to be mailed to the *Pro Se* Office of the United States District Court for the Southern District of New York.

Signature of Plaintiff:

Pro-Se

Only CopyUNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORKMR Tremel Williamson Pro-Se

(In the space above enter the full name(s) of the plaintiff(s)/petitioner(s).)

Civ. ( ) ( )

- against -

Mount Vernon Police Dept \* Det Griffin  
\* Det Antonini \* Officer Campo and  
Sergeant Fagan and the City of Mount  
Vernon N.Y.

## AFFIRMATION OF SERVICE

(In the space above enter the full name(s) of the defendant(s)/respondent(s).)

I, MR Tremel Williamson, declare under penalty of perjury that I have  
(name)served a copy of the attached Civil Rights Act 42 U.S.C. 1983 Claim  
(document you are serving)upon PRO-SE Department Rm-238  
500 Pearl ST. U.S. Southern District Court whose address is Corporate  
(name of person served)Counsel City of Mount Vernon One Roosevelt Sq City Hall 10550  
(where you served document)by United States Postal Mail FIRST CLASS  
(how you served document: For example - personal delivery, mail, overnight express, etc.)Dated: Valhalla, N.Y.  
(town/city) (state)July, 7th, 2015  
(month) (day) (year)Tremel Williamson  
SignatureValhalla County Jail P.O. Box 10  
AddressValhalla NY  
City, State10595  
Zip Code914-231-1000  
Telephone Number

16: The U.S. United State Southern District  
Court House Pro-Se Dept-Rm-230

Re: Claimant - Terrell Williamson #187575

July 7<sup>th</sup> 2015

Request

To Whom It may Concern  
I hereby briefly Submit This brief Message that  
behind Waiting for my State Witness Affidavit which  
Will be mailed out when Received back after Notarized  
That is The only one page Missing I will forward  
As soon as I Receive Thank you

Respectfully Submitted

*Terrell Williamson*  
Claimant

Pro-Se

Signature

